TRAINING EXPERIENCE AND ATTITUDES TOWARDS SAFEGUARDING CHILDREN REPORTED BY DENTAL STUDENTS IN SAUDI ARABIA

Rasha Al-Dabaan * and Rehab Allam**

ABSTRACT

Introduction: Dental practitioners have ethical and legal responsibilities toward protecting children from child abuse and neglect (CAN). Training the dental team in safeguarding children is recommended, to be able to detect and report suspected child maltreatment. Therefore, the purpose of this study was to assess training experience of dental students in CAN and assess their attitudes towards the importance of safeguarding children.

Methodology: A self – administered structured questionnaire was distributed by hand to both fourth and fifth year students in the College of Dentistry, King Saud University in Riyadh. The questionnaire included demographic questions, questions related to previous training in CAN, and attitudes of dental students towards CAN.

Results: Only 141 dental students participated in this study. Around 7% of participants have had previous training in child protection. Only 5.5% from male students and 9% from female students had previous training in CAN. There were no significant differences between genders or between academic years in terms of having previous CAN training. However, 80.4% of dental students agreed that more training is required in this field.

Conclusion: The results of this study show that there is an insisting need to include CAN training in undergraduate University courses for dental students.

INTRODUCTION

The promotion of health and development in children and safeguarding children to grow in a positive and healthy environment is the responsibility of all health care providers. Being aware of any abnormalities or neglectful and abusive behaviors towards the child is a responsibility of all health care providers including the dental team. In a previous study, healthcare providers in Saudi Arabia were incapable of defining child abuse and neglect (CAN), categorize its types, and identify

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its risk factors due to the deficiency of necessary training in child protection and identifying CAN, although reporting suspected cases of CAN has become mandatory for all healthcare professionals in Saudi Arabia. This law was sanctioned in 2008 by the Minister of Health. Previous studies have emphasized the importance of the dental team towards safeguarding children. However, specific training is required by the dental practitioner to be able to recognize and report CAN, and previous studies have highlighted the importance of education in CAN in both undergraduate and postgraduate levels. For example, Sonbol et al. in 2012 reported that dentists with previous training in child protection had better knowledge about how to identify and report CAN cases. A study done on dental practitioners working in Saudi Arabia reported inadequate training in child protection, however no previous study was done on dental students in Saudi Arabia to assess the level of training in CAN. Therefore, the purpose of this study was to assess the level of training of dental students in CAN, as well as assess their attitudes towards the importance of safeguarding children.

MATERIALS AND METHODS

This research is part of a study that was conducted at the College of Dentistry in King Saud University, Riyadh. Ethical approval for this research was granted by the College of Dentistry Research Center (CDRC).

Both, fourth year and fifth year dental students were included in this research, since these students are involved in clinical pediatric dentistry courses. A self-administered structured questionnaire was distributed by hand to both fourth and fifth year students, in both female and male college of dentistry campuses in King Saud University in February 2016. The average time to complete the survey was approximately 10 minutes.

Dental students are taught all subjects related to dentistry in the English language, so the questionnaire used in this study is in the English language and was taken from a previous study. The survey had already been validated and pilot tested by Al-Dabaan et al. Only one part of the total questionnaire is discussed in this paper; training experience in CAN and attitudes of participants towards the importance of being actively involved in protecting children from any form of abuse or neglect. A cover letter was attached to the questionnaire; which included and clarified all the following; purpose of the research, consent to participate, confidentiality of the information provided as well as voluntary participation.

The sections of the questionnaire contained within this paper included a demographics part (two questions) that assessed gender and academic year.

The second part consisted of questions intended to survey if students have had previous training in child protection (one question) and type of training they have taken (three questions). The third part included three items; attitude of participants towards knowledge about child protection protocols, if participants think they need training in safeguarding children and how confident they are in recognizing signs of CAN.

The response formats for these sections included yes or no answers and the selection of a response according to a three-point Likert scale “disagree”, “neutral”, and “agree”, respectively. Data received were entered in Microsoft Excel, and then transferred, coded and analyzed using the Statistical Package for Social Sciences (IBM SPSS) version 22 software.

RESULTS

A total number of 216 students from both fourth and fifth years of dental school in the academic year 2015-2016 were approached for this study. Only 141 (65.3%) students participated in this research. Fourth year students comprised 96 (68%), while the number of fifth year students who participated in this study were 45 (32%). Table 1 shows the distribution of male and female students in these two groups.
TRAINING EXPERIENCE AND ATTITUDES TOWARDS SAFEGUARDING CHILDREN

TABLE (1) Distribution of male and female students in academic years

<table>
<thead>
<tr>
<th>Academic year</th>
<th>Gender</th>
<th>Number (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>4th year</td>
<td>Male</td>
<td>50 (52.1)</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>46 (47.9)</td>
</tr>
<tr>
<td>5th year</td>
<td>Male</td>
<td>24 (53.3)</td>
</tr>
<tr>
<td></td>
<td>Female</td>
<td>21 (46.7)</td>
</tr>
</tbody>
</table>

The results of this study showed only 10 (7.1%) of participants have had previous training in child protection; only 4 (5.5%) male students had training versus 6 (9.0%) females. No significant differences were found between genders or between fourth and fifth year students in having had previous training, where only 9 (9.4%) students from fourth year versus 1 (2.3%) from fifth year stated that they have had previous training in CAN.

When asked about the type of child protection training participants had previously taken, only 7 (4.9%) had stated they had training in the dental school, only 3 (2.1%) had attended a workshop on child protection, while only 4 (2.8%) have had web-based training in CAN.

As for questions related to students’ attitudes toward CAN in terms of the importance of training in child protection, if they required training in child protection, and if they were confident about detecting CAN; responses of participants are presented in Table 2.

TABLE (2) Attitude of participants toward CAN

<table>
<thead>
<tr>
<th>Question</th>
<th>Answer</th>
<th>Number (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Dentists’ knowledge about child protection protocols is important</td>
<td>Disagree</td>
<td>4 (2.9)</td>
</tr>
<tr>
<td></td>
<td>Neutral</td>
<td>22 (15.9)</td>
</tr>
<tr>
<td></td>
<td>Agree</td>
<td>112 (81.2)</td>
</tr>
<tr>
<td>More training is required for dentists in this field</td>
<td>Disagree</td>
<td>1 (0.7)</td>
</tr>
<tr>
<td></td>
<td>Neutral</td>
<td>26 (18.8)</td>
</tr>
<tr>
<td></td>
<td>Agree</td>
<td>111 (80.4)</td>
</tr>
<tr>
<td>I can confidently recognize signs of abuse in a child</td>
<td>Disagree</td>
<td>26 (18.8)</td>
</tr>
<tr>
<td></td>
<td>Neutral</td>
<td>66 (47.8)</td>
</tr>
<tr>
<td></td>
<td>Agree</td>
<td>46 (33.3)</td>
</tr>
</tbody>
</table>

DISCUSSION

Lack of training in CAN detection and reporting is evident from the results of this study. The number of dental students whom have reported previous training in CAN in this study is alarmingly very low when compared with similar previous studies done on dental students. For example, a study done in Jordan by Al-Jundi et al in 2010 reported that 82.7% of their undergraduate students have had formal training in child protection in their dental school, however, they still reported deficiency in knowledge about how to detect or report suspected cases of CAN. In the UAE, the first study investigating 578 UAE dental students’ attitudes and knowledge regarding child physical abuse was conducted by Hashim and Al-Ani in 2013. The study reported that around one-quarter of dental students did not know where to report child abuse and neglect, thus the authors suggested the need for training in CAN within the curriculum of dental students. A similar study was done by Jordan et al in 2012 on Croatian dental students during their study at the University of Zagreb School of Dental Medicine. This study reported that around one-third of students have come across the topic of CAN. Moreover, Thomas et al in 2006 reported that all senior dental students in their study received training in CAN and similar findings were reported in 2011 by Newcity et al in the United States. However, it is important to note that a big leap was made in CAN training in the 70s in the United States which was probably due to early set legislation in child protection. On the contrary, similar studies done on dental practitioners in Italy found that education in CAN was lacking among Italian dentists where only 9.0% per cent had previous training and similar findings were reported in Brazil, France and in Greece.

When dental students in this study were asked about the type of CAN training they have had; only around 5% reported having CAN training in the college of dentistry. This result urgently requires
that all undergraduate students have compulsory CAN training in dental school, especially since it was observed that dental practitioners with previous training in child protection have had some progress in detecting CAN. Moreover, it was also reported in the same study that there is an increased awareness about child protection training in universities in more recent years. A study done in the UK in 2003 by Welbury et al. have reported that most young dentists have received more undergraduate lectures in child maltreatment in comparison to older dentists. A similar study done on dentists in Scotland reported that more dentists have had formal training in child protection.

In this study, most dental students (81.2%) agreed that knowledge about child protection protocols is important, and more than three fourth (80.4%) agreed that more training in CAN is needed. This finding indicates that there is an awareness among dental students about the important role the dental team has towards child protection, and the ethical duties towards protecting children from abuse. Similar findings were reported in previous studies, where many participants were interested in CAN training.

Most relevant studies reported that a large number of participants are interested and eager to learn about CAN even if they had previous training. Moreover, participants in previous studies believed that training in CAN should be part of a vocational training.

However, it is distressing to report that around one third of dental students in this study have false confidence in their ability to recognize CAN, especially since they have reported little to no training in safeguarding children. This false perception may lead to overlooked abuse or neglect in the dental practice, which may have fatal outcomes. Moreover, this over confidence may prevent dental students from seeking CAN training.

CONCLUSION

The results of this study show that there is an insisting need to include CAN training in University undergraduate courses and in vocational training for dental students and dental practitioners.

REFERENCES

10. Al-Dabaan R, Newton JT, Asimakopoulou K. Knowledge, attitudes, and experience of dentists living in Saudi Arabia


